

Get Set for Retirement: Insurance

2020



Important information

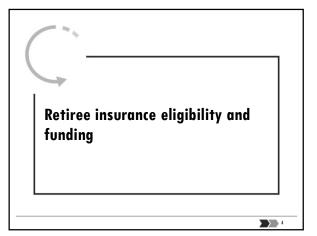
- This presentation is not a comprehensive description of the insurance benefits offered by PEBA.
- For more information, and before you make enrollment decisions, review the *Insurance Benefits Guide*.



Topics to cover

- Retiree insurance eligibility and funding.
- Retiree enrollment and eligible dependents.
- Retiree health plans.
- Prescription coverage.
- Dental coverage.
- State Vision Plan.
- Life insurance.
- Long term disability.
- MoneyPlus.
- · Returning to work.
- Resources.





Retiree group insurance eligibility

- Eligibility for retiree group insurance is not the same as eligibility for retirement.
- Determining retiree insurance eligibility is complicated, and only PEBA can make that determination.
- **Before** you retire, contact PEBA to verify your eligibility for retiree insurance.
 - Submit an <u>Employment Verification Record</u> as early as six months prior to your retirement date.
 - This starts the process PEBA uses to determine your eligibility for retiree insurance and any possible funding.



Requirements for any retiree coverage



- Regardless of how or when you qualify for retirement, to qualify for the group insurance program, your last five years must be:
 - · Served consecutively;
 - In a full-time, permanent position; and
 - With an employer participating in the state insurance program.
- For State ORP participants and members whose employer does not participate in a PEBA-administered retirement plan, eligibility is determined as if the participant were a member of the South Carolina Retirement System.



Requirements for any retiree coverage



- Earned service credit is:
 - Time earned and established in one of the defined benefit pension plans PEBA administers;
 - Time worked while participating in the State Optional Retirement Program (State ORP); or
 - Time worked for an employer that participates in the State Health Plan, but not necessarily in a PEBA-administered retirement plan.
- Earned service credit does not include any purchased service credit not considered earned service in the retirement plans.

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Retiree group insurance funding



- Retirees of state agencies, state institutions of higher education, public school districts, or other employers that participate in the S.C. Retirement Health Insurance Trust Fund may be eligible to receive state funding toward their premiums if they meet certain requirements.
- Optional employers determine if their retirees pay all or part of the insurance premiums.
- Changing jobs could affect your eligibility for funding.
- See Retiree Insurance Eligibility, Funding flyers in the Navigating Your Benefits series for more information.



For employees hired into an insuranceeligible position before May 2, 2008



 $Retirees\ of\ state\ agencies, state\ institutions\ of\ higher\ education\ and\ public\ school\ districts^1$

Retirement status	Earned service credit with an employer participating in the State Health Plan	Responsibility for paying for premiums	
employment 5 years, but less than 10 years		You pay the full premium (employee and employer share).	
after reaching service or disability retirement eligibility	10 or more years	You pay the employee share of the premium only.	
Left employment	Less than 20 years	Not eligible for retiree insurance coverage.	
before reaching retirement eligibility	20 or more years	You pay only the employee share of the premium.	

For employees hired into an insuranceeligible position on or after May 2, 2008



Retirees of state agencies, state institutions of higher education and public school districts¹

Retirement status	Earned service credit with an employer participating in the State Health Plan	Responsibility for paying for premiums	
Left employment	5 years, but less than 15 years	You pay the full premium (employee and employer share).	
after reaching service or disability retirement eligibility	15 years, but less than 25 years	You pay the employee share of the premium and 50% of the employer share of the premium.	
	25 or more years	You pay the employee share of the premium only.	
Left	Less than 20 years	Not eligible for retiree insurance coverage.	
employment before reaching retirement eligibility	20 years, but less than 25 years	You pay the employee share of the premium and 50% of the employer share of the premium.	
	25 or more years	You pay the employee share of the premium only.	

For employees hired into an insuranceeligible position with an optional employer¹



Retirement status	Earned service credit with an employer participating in the State Health Plan	Responsibility for paying for premiums
Left employment after reaching service or disability retirement eligibility	At least 5 years	Your portion of the premium, up to the full amount of the employee and employer share, is determined by your employer.
Left employment	Less than 20 years	Not eligible for retiree insurance coverage.
before reaching retirement eligibility	20 or more years	Your portion of the premium, up to the full amount of the employee and employer share, is determined by your employer.

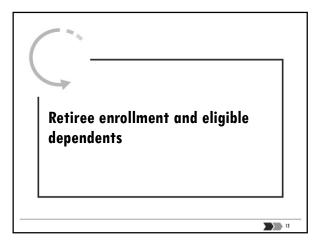
¹ The employee must serve the last five years consecutively in a full-time, permanent position with an employer participating in the



55/25 year rule



- If you are a Class Two member of SCRS who retires under the 55/25 early retirement provision, you must pay the full premium (employee and employer share) until:
 - You reach age 60; or
 - The date you would have reached 28 years of service credit had you not retired, whichever occurs first.



Retiree enrollment

- If you do not submit an Employment Verification Record prior to your retirement, you must do so within 31 days of your retirement or a special eligibility situation, such as marriage or adoption. Log in to MyBenefits at mybenefits.sc.gov to submit special eligibility situation changes.
- If PEBA determines you are eligible for retiree insurance, you must submit the following within 31 days of retirement:
 - Retiree Notice of Election form; and
 - <u>Certification Regarding Tobacco or E-cigarette Use</u>, if applicable.



Eligible spouse

- Retiree cannot cover a spouse if:
 - Spouse is eligible for coverage as an employee; or
 - Spouse is eligible for coverage as a retiree unless spouse is only eligible for non-funded or partially funded insurance, or the spouse retired from an optional employer.



Eligible children



- Natural child.
- Stepchild.
- Adopted child.
- Child placed for adoption.
- · Foster child.
- Child for whom employee has legal custody.

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Dependent children



- Under age 26.
- Coverage may continue beyond age 26 if the child is approved for incapacitation.
- If employed with participating employer, the child may:
 - Enroll as an active employee; or
 - Enroll as a dependent child.

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Required documentation



- Copies of supporting documentation must be submitted to enroll a spouse or child.
 - Spouse:
 - Marriage license; or
 - First page of most recent tax return, if filing jointly.
 - Child:
 - Long-form birth certificate.
- <u>Enrollment Documentation Worksheet</u> is a complete list of acceptable documentation to prove the relationship of family members you're adding to coverage.

Eligible survivors



- Dependents covered at time of retiree's death may continue health, dental and vision coverage.
 - Spouse eligible until he remarries.
 - Children remain eligible until age 26.
 - If all coverage is canceled, cannot reenroll as survivor.
 - Must pay premiums.

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Annual open enrollment



- October 1-31.
- Make coverage changes for following year (effective January 1).
- Dental changes can be made only during open enrollment in odd-numbered years.
- \bullet Log in to MyBenefits at $\underline{\text{mybenefits.sc.gov}}$ to make open enrollment changes.

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Retiree health plans

State Health Plan



- Self-funded insurance plan:
 - Employees' and employers' premiums are held in a trust fund from which PEBA pays claims.
 - BlueCross BlueShield of South Carolina processes medical claims.
- Cost of the State Health Plan compares favorably to other plans.
 - Learn more at www.peba.sc.gov/factsfigures.html.
- Health management is key to containing Plan costs and premiums.



State Health Plan provider network



- · Worldwide coverage.
- You pay deductible, copayments and coinsurance.
- Network provider files claims and accepts the Plan's allowed amount, even if its charges are higher.
 - If you use an out-of-network provider, you may have to file claims, and you can be balance billed. You pay a higher coin surance, too.
- Use Find a Provider at <u>StateSC.SouthCarolinaBlues.com</u> to find a network doctor near you.



Non-Medicare-eligible choices



- State Health Plan, which includes prescription benefits.
 - · Standard Plan.
 - Savings Plan.
- TRICARE Supplement Plan.
 - For eligible members of the military community.
 - TRICARE rules apply.
 - Coverage ends at 65.

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Standard Plan



- Lower annual deductibles and higher monthly premiums.
- Pay copayments for office visits, outpatient facilities and emergency care.
- Pay copayments for prescription drugs.
- Coverage of adult well visits for primary members at specified age intervals subject to copayments, deductibles and coinsurance.

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Savings Plan



- High-deductible plan with lower monthly premiums.
- No copayments.
- Pay the allowed amount for prescription drugs until you meet your annual deductible. Then, you pay your coinsurance.
- Coverage of adult well visits for primary members every year at no cost.
- Eligible to contribute to a Health Savings Account (HSA).
 Not through PEBA MoneyPlus.

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Medicare-eligible choices in retirement



- Medicare Supplemental Plan.
- Standard Plan.
- See <u>Insurance Coverage for the Medicare-eligible Member</u> for detailed information.

Enrolling in Medicare



- Once eligible, you should enroll in Medicare Parts A (hospital coverage) and B (medical coverage).
- The Medicare enrollment period begins three months before your 65th birthday.
- If receiving Social Security benefits, the Social Security Administration will contact you and enroll you automatically. Otherwise, you must contact Social Security to enroll.

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Becoming Medicare-eligible before age 65



- You must notify PEBA and provide a copy of your Medicare card.
- You can change health plans within 31 days of Medicare Part A eligibility.



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2020 Medicare benefits



• There is no Medicare or Medicare Supplemental Plan coverage outside the U.S. and U.S. territories.

Part A (hospital benefits) • \$1,408 deductible per benefit period.1

Part B (medical benefits)

- \$198 annual deductible.¹
 \$144.60 (average month)
- No monthly premium if enough work \$144.60 (average monthly premium as credits established.
 - determined by Medicare). Plan pays 80 percent of approved



2020 Medicare Supplemental Plan benefits



- Pays Medicare Part A deductible (\$1,408).1
- Pays Medicare Part B deductible (\$198).1
- Pays Medicare coinsurance, up to 100 percent of Medicare-approved charges.
- Offers no coverage outside the U.S.
- Includes prescription drug benefit.
- Claims for non-Medicare subscribers are processed under the Standard Plan.

¹ Medicare deductibles are subject to change.



2020 Medicare Supplemental Plan benefits example



If covered by Medicare and Medicare Supplemental Plan, your claim will be processed like this:

¹ Medicare deductibles are subject to change.

 Medicare-approved amount
 \$7,500

 2020 Medicare Part A deductible¹
 \$1,408

 Medicare payment
 \$6,092

 Remaining bill
 \$1,408

Next, the Medicare Supplemental Plan benefits are applied:

Remaining bill \$1,408
Medicare Supplemental Plan pays
Medicare Part A deductible
Your total payment \$0



Automatic enrollment in the Medicare Supplemental Plan



- Automatic enrollment at age 65 for those who participate in the State Health Plan.
- PEBA sends you a notification three months before your 65th birthday.
- Can choose to opt out of the Medicare Supplemental Plan
- Medicare will be primary whether or not you opt out as long as you are not working in an insurance-eligible position on active coverage.
 - If you remain on the Standard Plan in retirement, Medicare will still pay first toward your expenses.

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Keeping Standard Plan with Medicare



- Uses carve-out method.
- Learn more in the <u>Insurance Coverage for the Medicare-eligible Member</u> handbook.

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Medicare and the TRICARE Supplement Plan



- If enrolled in the TRICARE Supplement Plan, you can cancel or switch health coverage once reaching Medicare Part A eligibility.
- TRICARE becomes TRICARE for Life, a Medicare supplement.

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2020 Health plan premiums



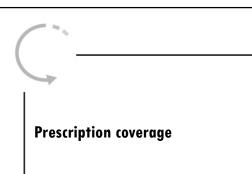
- Premium is determined by your coverage level:
 - Retiree;
 - Retiree/spouse;
 - Retiree/children; and
 - Full family.
- Rates may vary for optional employers. Contact your benefits administrator for your premiums.

Tobacco-use premium



- Applies to State Health Plan subscribers only.
- \bullet \$40 per month for subscriber-only coverage.
- \$60 per month for other levels of coverage.
- Automatically charged unless subscriber:
 - Certifies as non-tobacco user with <u>Certification Regarding</u> <u>Tobacco and E-cigarette Use</u> form; or
 - Certifies that all covered tobacco and e-cigarette users have completed the tobacco cessation program, <u>Quit For Life</u>*.

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Medicare Part D drug program



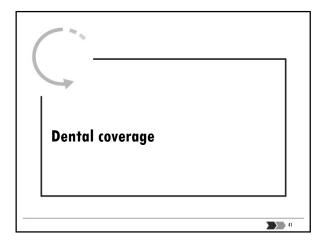
- Most subscribers covered by PEBA should remain enrolled in Express Scripts Medicare, which is the State Health Plan's Medicare Part D drug program.
- Subscribers may have only one Part D plan.
- If you enroll in a separate Part D program, you lose PEBA prescription benefits, and your premium will remain the same.
- Learn more in <u>Insurance Coverage for the Medicare-eligible Member</u> or contact Express Scripts, the pharmacy benefits manager.

Medicare Supplemental Plan and Standard Plan prescription benefits



• You pay up to \$3,000 per person in prescription drug copayments. Then, you pay nothing.

30-day supply at network pharmacy	90-day supply at network pharmacy or mail-order pharmacy
Tier 1 (generic): \$9 Tier 2 (preferred brand): \$42 Tier 3 (non-preferred brand): \$70	Tier 1 (generic): \$22 Tier 2 (preferred brand): \$105 Tier 3 (non-preferred brand): \$175



Dental Plus and Basic Dental



- Enroll within 31 days of retirement or special eligibility situation.
- Enroll during open enrollment in odd-numbered years.
- Once enrolled, you must remain enrolled until next oddnumbered year open enrollment period or within 31 days of a special eligibility situation.
- Coverage is the same as active subscriber coverage.



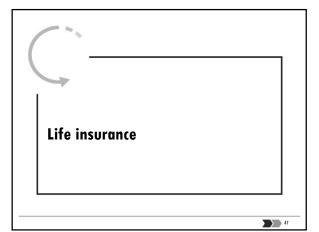
2020 Dental coverage premiums • Premium is determined by your coverage level: Retiree; • Retiree/spouse; • Retiree/children; and • Full family. • Rates may vary for optional employers. Contact your benefits administrator for your premiums. 43 **State Vision Plan 3** 44 **State Vision Plan** • Enroll within 31 days of retirement or special eligibility situation or yearly during open enrollment. • Coverage is the same as active subscriber coverage.

2020 Vision coverage premiums



- Premium is determined by your coverage level:
 - · Retiree;
 - Retiree/spouse;
 - Retiree/children; and
 - · Full family.
- Rates may vary for optional employers. Contact your benefits administrator for your premiums.

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\$3,000 Basic Life insurance



- Must have been enrolled in a health plan offered through PEBA at time of retirement.
- Can convert to a whole life policy within 31 days of retirement date.
- Premiums quoted and billed by contracted vendor, Met life
 - Retirees receive the conversion forms directly from MetLife.

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- Can convert existing coverage to a whole life policy within 31 days of retirement.
- Can continue existing coverage within 31 days of retirement.
 - Continue coverage in \$10,000 increments.
 - Retiree coverage ends the January 1 following the retiree's 75th birthday.

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Optional Life insurance premiums in retirement



- Retirees continuing coverage will pay the same premium as active employees.
- Converted policy premiums are underwritten individually by MetLife.
- Retirees will receive the continuation and/or conversion forms directly from MetLife.

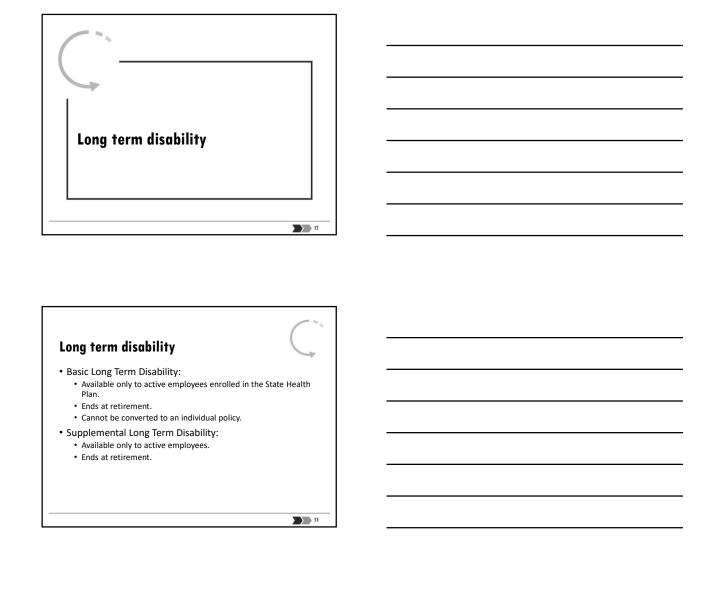
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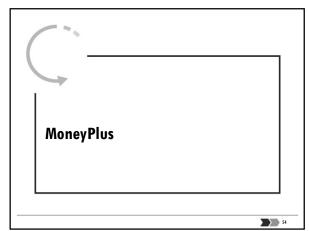
Dependent Life insurance



- Can convert existing coverage to a whole life policy within 31 days of retirement.
- Premiums quoted and billed by contracted vendor,

 MotLife
 - Retirees will receive the conversion forms directly from MetLife.



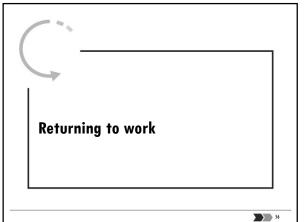


MoneyPlus



- Not available in retirement.
- Retirees in the Savings Plan who are not eligible for Medicare may continue Health Savings Account contributions, but not through MoneyPlus.

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Returning to work for participating employer after retirement



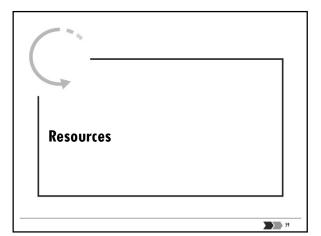
- If you return to active employment in an insuranceeligible position with a participating employer, you will no longer be eligible for retiree coverage.
 - You can return to active coverage; or
 - You can refuse all coverage.
- If you return to active employment and are not in an insurance-eligible position, you may remain on your retiree coverage.
- Once your active employment ends, you may return to your retiree coverage. If you are Medicare-eligible, Medicare will be primary.

Insurance coverage as a return-towork retiree



- If you elect coverage under the State Health Plan as an active employee and you are Medicare-eligible, the State Health Plan will be primary, paying claims before Medicare.
 - You may want to drop Medicare Part B.
- If you refuse all health coverage under the State Health Plan and you are Medicare-eligible, Medicare will be primary.
 - You will not be able to enroll in PEBA's Medicare Supplemental Plan and may want to pursue a supplemental plan on your own.





Insurance Benefits Guide



- A detailed overview of insurance benefits, including:
 - Descriptions of benefits;
 - Premium rates; and
 - Contact information.
- Available on PEBA's homepage at www.peba.sc.gov.

Navigating Your Benefits series



- www.peba.sc.gov/nyb.html.
- Plain-language explanations of insurance and retirement benefits.
- Flyers and videos.





MyBenefits



- mybenefits.sc.gov
- Accessible online 24/7.
 - Review benefits statement;
 - Change contact information;
 - Change coverage during some special eligibility situations;
 - $\bullet\,$ Make changes during open enrollment; and
 - Upload supporting documentation.



Your benefits office in retirement



- State agency, higher education institutions and public school district retirees:
 - PEBA will be your benefits administrator.
 - Premiums may be deducted from your retirement check.
- Optional employer retirees:
 - Your former employer will remain your benefits administrator.
 - You will pay premiums through your former employer.

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